



Best Available Copy

CLAIMS ONLY						SERIAL NO. _____		FILING DATE _____				
						APPLICANT(S) _____						
CLAIMS												
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	
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TOTAL IND.	2	↓										
TOTAL DEP.	2	↓	↓									
TOTAL CLAIMS	4											

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS